Listing of Claims:

This listing of claims will replace all prior versions, and listings, of claims in the application:

1. (Currently Amended) A method of assessing a risk of sudden cardiac death for a patient, the method comprising:

    acquiring patient data at one of a plurality of healthcare locations;

    identifying the patient as being worthy of an on-going sudden cardiac death risk assessment based on the acquired patient data;

    accessing a sudden cardiac death risk assessment tool via an icon displayed on a patient monitor; and

    performing the on-going sudden cardiac death risk assessment whenever new patient data is acquired at any one of the plurality of healthcare locations.

2. (Original) The method claim 1 and further comprising performing the on-going sudden cardiac death risk assessment in real-time whenever new patient data is acquired.

3. (Original) The method of claim 1 and further comprising automatically performing the on-going sudden cardiac death risk assessment whenever new patient data is acquired.

4. (Original) The method of claim 1 and further comprising acquiring patient data including at least one of the cardiological patient data and non-cardiological patient data.

5. (Cancelled)

6. (Original) The method of claim 1 and further comprising acquiring patient data at one of a plurality of healthcare locations including at least one of a patient's home, an

emergency room, an operating room, a cardiology clinic, a sleep disorders clinic, a catheterization laboratory, and an electrophysiology laboratory.

7.   (Original) The method of claim 1 and further comprising displaying an assessment of sudden cardiac death risk on a patient monitor located at one of the plurality of healthcare locations.

8.   (Original) The method of claim 1 and further comprising storing the acquired patient data in a hospital information system and accessing the acquired patient data from the hospital information system in order to perform the on-going sudden cardiac death risk assessment.

9.   (Original) The method of claim 1 and further comprising calculating a probability of sudden cardiac death for the patient based on at least one of the new patient data and a medical history of the patient.

10.   (Original) The method of claim 9 and further comprising alerting a healthcare provider if the probability of sudden cardiac death is greater than a threshold.

11.   (Original) The method of claim 9 and further comprising comparing the probability of sudden cardiac death to at least one probability constant to determine a risk level.

12.   (Original) The method of claim 11 and further comprising selecting the at least one probability constant for a specific patient.

13.   (Original) The method of claim 1 and further comprising performing the on-going sudden cardiac death risk assessment based on at least one of an electrocardiogram, an

echocardiogram, cardiac imaging, a stress test, a stress-echocardiogram, a stress-nuclear test, a cardiac catheterization study, an electrophysiology study, and a Holter study.

14.   (Original) The method of clam 1 and further comprising performing the on-going sudden cardiac death risk assessment based on the measurements including at least one of the blood pressure temperature, respiration rate, carbon dioxide, oxygen saturation, and weight.

15.   (Original) The method of claim 1 and further comprising identifying the patient as being worthy of an on-going sudden cardiac death risk assessment based on at least one of age, gender, race, family history, weight, blood pressure, an arrhythmia, ejection fraction, a pre-existing condition, a previous embolism, and patient lifestyle.

16.   (Original) The method of claim 1 and further comprising flagging an identification associated with the patient if the patient is worthy of an on-going sudden cardiac death risk assessment.

17.   (Original) The method of claim 1 and further comprising updating the on-going sudden cardiac death risk assessment whenever new patient data is acquired at any one of the plurality of healthcare locations.

18.   (Original) The method of claim 1 further comprising selecting at least one input parameter upon which the on-going sudden cardiac death risk assessment is performed.

19.   (Original) The method of claim 1 and further comprising identifying a profile of another patient that at least partially matches the new patient data.

20.   (Original) The method of claim 1 and further comprising performing the on-going sudden cardiac death risk assessment based upon at least one of T-wave alternans, QRS duration, an electrocardiogram serial comparison, an arrhythmia, heartrate turbulence, signal-averaged electrocardiograms, rhythm abnormalities, ST/T measurements, and heart rate variability.

Claims 21-40.   (Cancelled)

41.   (New) A method of assessing a risk of sudden cardiac death for a patient, the method comprising:

    acquiring patient data at one of a plurality of healthcare locations;

    identifying the patient as being worthy of an on-going sudden cardiac death risk assessment based on the acquired patient data;

    performing the on-going sudden cardiac death risk assessment whenever new patient data is acquired at any one of the plurality of healthcare locations;

    calculating a probability of sudden cardiac death for the patient based on at least one of the new patient data and a medical history of the patient; and

    alerting a healthcare provider if the probability of sudden cardiac death is greater than a threshold.

42.   (New) A method of assessing a risk of sudden cardiac death for a patient, the method comprising:

    acquiring patient data at one of a plurality of healthcare locations;

    identifying the patient as being worthy of an on-going sudden cardiac death risk assessment based on the acquired patient data;

    performing the on-going sudden cardiac death risk assessment whenever new patient data is acquired at any one of the plurality of healthcare locations;

calculating a probability of sudden cardiac death for the patient based on at least one of the new patient data and a medical history of the patient; and

comparing the probability of sudden cardiac death to at least one constant to determine a risk level.